

Tel: 703-770-1079 Fax: 703-893-0600 www.bdo.com 8401 Greensboro Drive, Suite 800 McLean, VA 22102

# AMERICAN COALITION FOR CLEAN COAL ELECTRICITY Instructions for Filing Form 8879-EO IRS e-file Signature Authorization for Form 990 For the year ended December 31, 2017

The original IRS E-file Signature Authorization form should be signed (use full name) and dated by an authorized officer of the organization.

Return your signed IRS e-file Signature Authorization Form 8879-EO to:

BDO USA, LLP 8401 GREENSBORO DRIVE, #800 MCLEAN VA 22102

There is no tax due with the filing of this return.

Do NOT separately file Form 990 with the Internal Revenue Service. Doing so will delay the processing of your return. We must receive your signed form before we can electronically transmit your return, which is due on or before November 15, 2018. We would appreciate you returning this form as soon as possible as this will expedite the processing of your return. The Internal Revenue Service will notify us when your return is accepted. Your return is not considered filed until the Internal Revenue Service confirms their acceptance, which may occur after the due date of your return.

#### Form 8879-EO

# IRS e-file Signature Authorization for an Exempt Organization

OMB	No.	1545-1878	

For calendar year 2017, or fiscal year beginning \_

\_\_\_\_\_ , 2017, and ending \_

▶ Do not send to the IRS. Keep for your records.

2017

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization

AMERICAN COALITION FOR CLEAN COAL ELECTRICITY

Employer identification number 52-1799853

Name and title of officer

MICHELLE BLOODWORTH, PRESIDENT/CEO

#### Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here   X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	5,035,431
2a	Form 990-EZ check here ▶b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here   Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here <b>b Tax based on investment income</b> (Form 990-PF, Part VI, line 5).		
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	5b	
	· · · · · · · · · · · · · · · · · · ·		

#### Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only	
X Lauthorize BDO USA, LLP	to enter my PIN 1 4 2 5 9 as my signature
ERO firm name	Enter five numbers, but do not enter all zeros
on the organization's tax year 2017 electronically filed return. If I hav being filed with a state agency(ies) regulating charities as part of the ERO to enter my PIN on the return's disclosure consent screen.	• • • • • • • • • • • • • • • • • • • •
As an officer of the organization, I will enter my PIN as my signature If I have indicated within this return that a copy of the return is being the IRS Fed/State program, I will enter my PIN on the return's disclose	filed with a state agency(ies) regulating charities as part of
Officer's signature > Michelle St. Montatt	Date > 11/9/2018
Part III Certification and Authentication	
<b>ERO's EFIN/PIN.</b> Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.	5 4 6 2 1 8 1 3 5 3 8
	Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_

ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2017)

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

4 F	or the	e 2017	calend	dar year, or tax year beginning		, 2017,	, and ending			, 20
			C Nam	e of organization				D Employer ide	ntification	number
<b>5</b> C	heck if ap	oplicable:	AM	ERICAN COALITION FO	OR CLEAN COA	L ELECTRICI	TY	52-1799	9853	
X	Addre		Doing	g business as						
	7 -	change	Num	ber and street (or P.O. box if mail is	E Telephone nu	mber				
	Initial	return	46	01 N. FAIRFAX DRIVE	2		1050	(202) 45	9 – 480	0
	Final	return/	City	or town, state or province, country,	and ZIP or foreign por	stal code		, ,		
	termir Amen	ded	AR	LINGTON, VA 22203				<b>G</b> Gross receipts	\$	5,035,431.
	return Applic			e and address of principal officer:	MICHELLE	BLOODWORTH		H(a) Is this a grou		
	pendii	ng		01 N. FAIRFAX DR, S			22203	subordinates <b>H(b)</b> Are all subord	?	
1	Toy ov	omnt ot						— ` ′		see instructions)
		empt sta		501(c)(3)   X   501(c)( AMERICASPOWER.ORG	6 ) ◀ (insert no	.) 4947(a)(1)	or 527		,	
							1	H(c) Group exem		
				X Corporation Trust	Association C	Other >	L Year of for	mation: 1992 <b>M</b>	State of le	gal domicile: VA
Pé	art I		mmar							
	1			ibe the organization's mission					HA'I' AI	OVANCE
ce		ENV	IRONN	MENTAL IMPROVEMENT,	ECONOMIC P	ROSPERITY,	& ENERGY S	ECURITY.		
nar										
Governance	2	Check	this bo	ox 🕨 🔛 if the organization	discontinued its op	erations or dispose	ed of more than 2	5% of its net assets	S	
	3	Numb	er of vo	oting members of the governing	g body (Part VI, line	1a)			3	23.
ø	4	Numb	er of in	dependent voting members of	the governing body	(Part VI, line 1b)			4	23.
Activities	l .			r of individuals employed in ca					5	8.
Ξ				r of volunteers (estimate if neces					6	21.
Ac	l .			ed business revenue from Part					7a	0.
				d business taxable income from	. , , ,				7b	
		140t ui	Holatot	2 Business taxable income non	11 0111 000 1, 1110 0	<del></del>		Prior Year	7.5	Current Year
		Contri	hutions	and grants (Part VIII line 1h)					0.	0.
ne	l .			s and grants (Part VIII, line 1h)				9,805,70		5,012,617.
ĕ				vice revenue (Part VIII, line 2g)						
Revenue				ncome (Part VIII, column (A), lir				1,17		10,804.
	11	Other	revenu	ue (Part VIII, column (A), lines 5	5, 6d, 8c, 9c, 10c, a	nd 11e)		1,70		12,010.
	12	Total r	revenue	e - add lines 8 through 11 (mus	st equal Part VIII, co	lumn (A), line 12) .		9,808,57		5,035,431.
	13	Grants	s and s	similar amounts paid (Part IX, co	lumn (A), lines 1-3)				0.	0.
	14	Benef	its paid	to or for members (Part IX, col	umn (A), line 4)				0.	0.
ģ	15	Salari	es, oth	er compensation, employee ber	nefits (Part IX, colur	nn (A), lines 5-10)		4,334,66	6.	1,892,840.
Expenses	16 a	Profes	ssional	fundraising fees (Part IX, colum	ın (A), line 11e)				0.	0.
ğ.	l .			sing expenses (Part IX, column		C	).			
Ш	17	Other	expens	ses (Part IX, column (A), lines 1	1a-11d, 11f-24e)			7,172,39	3.	3,267,132.
	l .			es. Add lines 13-17 (must equa				11,507,05	9.	5,159,972.
	l .			s expenses. Subtract line 18 fro		,,,		-1,698,48	0.	-124,541.
es							Be	ginning of Current		End of Year
Net Assets or Fund Balances	20	Total	accate (	(Part X, line 16)				6,842,11	3.	5,659,722.
4ss Bal	21			es (Part X, line 26)				1,647,69		589,844.
팔	22			r fund balances. Subtract line 2	11 from line 20			5,194,41		5,069,878.
	rt II			e Block	i irom line 20			3,171,11	<u> </u>	3,003,070.
			•		hio votumo in alcudina					dedee and haliat it is
true	aer per e, corre	ct, and	complet	y, I declare that I have examined to te. Declaration of preparer (other the	an officer) is based on	all information of whi	ich preparer has an	s, and to the best of y knowledge.	my know	neage and belief, it is
				m Ill and to						
Sig	n		-//	/ LCKIED XI. I TWOOLL				11/9/2	018	
əiy Hei			Signatu	re of officer				Date		
16	е	I	MICH	ELLE BLOODWORTH		PRESID	ENT/CEO			
			Type or	print name and title	1	0 X				
		Print/	Type pre	eparer's name	Preparer's signatur	e <i>X</i> //	Date	Check	if PTIN	
Paic		MARC	C BE	ERGER	///Anc.	150.	11/8/18		ed P	01871563
	parer	Firm's	name	▶BDO USA, LLP	y will	July -	1	Firm's EIN ▶ 1		
Jse	Only			s ▶8401 GREENSBORO	DRIVE, #800	MCLEAN. VA	22102			3-0600
VI av	/ tha			this return with the prepare		•		1 110110 1101		17
via)	y iiile	ii (O U	iocu55	This return with the prepare	on onlowin above?	(SEE ILISTI MOTIOLIS)	<u>,</u>		[-	X Yes No

AMERICAN COALITION FOR CLEAN COAL ELECTRICITY 52-1799853 Form 990 (2017) Page 2 Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: ATTACHMENT 1 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?..... If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ FEDERAL POLICY AND ADVOCACY: ACCCE ADVOCATES ON BEHALF OF THE COAL-BASED ELECTRICITY INDUSTRY AT THE FEDERAL LEVEL, AS WELL AS IN THE STATES. ACCCE CONDUCTS POLICY ANALYSIS AND DEVELOPS FACTUAL MATERIALS TO EXPLAIN THE BENEFITS OF THE COAL FLEET AND THE EFFECTS OF THE PUBLIC POLICIES ON COAL-BASED ELECTRICITY AND ELECTRICITY CONSUMERS. THESE MATERIALS ARE USED BY ACCCE STAFF AND ACCCE MEMBER COMPANIES TO EDUCATE CONGRESS, THE EXECUTIVE BRANCH, ELECTED AND APPOINTED STATE OFFICIALS, AND MANY OTHER STAKEHOLDERS. **4b** (Code: ) (Expenses \$ including grants of \$ ATTACHMENT ) (Revenue \$ 4c (Code: ) (Expenses \$ including grants of \$ ATTACHMENT 3

) (Revenue \$

(Expenses \$ including grants of \$

4e Total program service expenses ▶

4d Other program services (Describe in Schedule O.)

JSA 7E1020 1.000 Form 990 (2017) Page **3** 

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		3.7	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII.	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	401		v
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Λ
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	4.46		Х
4.5	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Λ
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	4.5		v
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	4.0		Х
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Λ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			v
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.		v
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4.0		Х
	If "Yes," complete Schedule G, Part III	19		77

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	$ \   \text{Did the organization report more than $5,000 of grants or other assistance to any domestic organization or } \\$			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated		37	
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			v
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
	to defease any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	ZJa		
D	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV.	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M_{\bullet,\bullet,\bullet}$ .	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			3.7
	Part I.	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	20		Х
	complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		Х
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34		34		Х
35a	or IV, and Part V, line 1	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	33a		
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R</i> ,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	-		
	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	Х	
			~~~	

Form	990 (2017)		F	Page 5
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4 -		
_	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this return.			
<b>L</b>	Statements, med for the calendar year ending with or within the year covered by this return.	2b	Х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 2	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_	37	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	C h	Х	
_	gifts were not tax deductible?	6b	Λ	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		
h	and services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
р 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			

14a

Χ

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
·u	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
b	committee, explain in Schedule O.  Enter the number of voting members included in line 1a, above, who are independent 1b 23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
'a	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
D	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
0				
_	the year by the following:	8a	Х	
a	The governing body?	8b	X	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	_	)	
	on bit online (This cooler Broqueste information about pointed not required by the internal Nevertal	0040	Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
D	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
-	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	5016	:)(3)s	only)
. •	available for public inspection. Indicate how you made these available. Check all that apply.	231,0	., (0)0	- · · · y )
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	/. and
	financial statements available to the public during the tax year.		, c.i.o.)	, , and
20	State the name, address, and telephone number of the person who possesses the organization's books and record	s: <b>▶</b>		
	MICHELLE BLOODWORTH 4601 N FAIRFAX DRIVE STE 1050 ARLINGTON VA 22203 702-459-4800			

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## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

L	Check this box if neither the organization nor	any related	organization compensate	ed any current offic	er, director, or trus	stee.

						<u>'</u>				
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unles	Pos heck ss pe	erson	e than control Highest compensated employee	an tee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
						ted				
(1)JOSEPH W. CRAFT, III	1.00									
DIRECTOR	0.	Х						0.	0.	0 .
(2)NICHOLAS K. AKINS	1.00									
DIRECTOR	0.	Х						0.	0.	0.
(3)DAVID TUDOR	1.00									
DIRECTOR	0.	Х						0.	0.	0 .
(4)MATTHEW K. ROSE	1.00									
DIRECTOR	0.	Х						0.	0.	0 .
(5)PATRICK O'LOUGHLIN	1.00									
DIRECTOR	0.	Х						0.	0.	0 .
(6)MARK FILLIPITCH	1.00									
DIRECTOR	0.	Х						0.	0.	0 .
(7)MATT RICKETTS	1.00									
DIRECTOR	0.	Х						0.	0.	0
(8)JOSH HELBIG	1.00									
DIRECTOR	0.	Х						0.	0.	0
(9)FRANK CALANDRA, JR	1.00									
DIRECTOR	0.	Х						0.	0.	0
(10)DOUG BLOM	1.00									
DIRECTOR	0.	X						0.	0.	0
(11)ROBERT MURRAY	1.00									
DIRECTOR	0.	X						0.	0.	0
(12)KEVIN J. CRAIG	1.00									
DIRECTOR	0.	Х						0.	0.	0
(13)JAMES SQUIRES	1.00									
DIRECTOR	0.	Х						0.	0.	0
(14)MIKE SMITH	1.00									
DIRECTOR	0.	X						0.	0.	0

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(A)		y	ipic	yee (C		anu i	iigi	(D)		(F)
Name and title	Average hours per week (list any hours for	box,	unles	Pos heck ss pe	ition more	than o is both or/trusto	an	Reportable compensation from	(E) Reportable compensation from related organizations	Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
15) KEMAL WILLIAMSON	1.00									
DIRECTOR	0.	X						0.	0.	0.
16) GARY SMITH	1.00									
DIRECTOR	0.	X						0.	0.	0.
17) DON GASTON	1.00									
DIRECTOR	0.	Х						0.	0.	0.
18) STEVE CHANCELLOR	1.00									
DIRECTOR	0.	Х						0.	0.	0.
19) CHRISTOPHER WOMACK	1.00									
DIRECTOR	0.	Х						0.	0.	0.
20) JAMES M. FOOTE	1.00									
DIRECTOR	0.	Х						0.	0.	0.
21) LANCE FRITZ	1.00									
DIRECTOR	0.	Х						0.	0.	0.
22) MERI SANDLIN	1.00									
DIRECTOR	0.	Х						0.	0.	0.
23) ROBERT BERRY	1.00									
DIRECTOR	0.	Х						0.	0.	0.
24) PAUL BAILEY	50.00									
CEO & PRESIDENT	0.				Х			852,860.	0.	48,730.
25) MICHELLE BLOODWORTH	50.00									
CHIEF OPERATING OFFICER	0.				Х			410,000.	0.	12,475.
1b Sub-total							<b>•</b>	0.	0.	0.
c Total from continuation sheets to Part VII, S	ection A						•	2,332,620.	0.	132,297.
d Total (add lines 1b and 1c)							<b>•</b>	2,332,620.	0.	132,297.
2 Total number of individuals (including but not							re	ceived more than	\$100,000 of	
reportable compensation from the organizatio			5			,			,	
3 Did the organization list any former office										Yes No
employee on line 1a? If "Yes," complete Sched	uie J for su	cn ina	ııvıdı	uai						3 X
4 For any individual listed on line 1a, is the										
organization and related organizations gr								•		. 37
individual										4 X
5 Did any person listed on line 1a receive or	accrue co	mpen	sati	on f	fron	any	un	related organization	on or individual	

## for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 8

Χ

Part VII Section A. Officers, Directors, Tru		y En	plo			and I	HIG			•
(A) Name and title	(B) Average hours per	(do r	not cl		ition	e than c	one	(D)  Reportable compensation	(E) Reportable compensation from	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below dotted line)	1		d a d		is or/tru Highest compensated employee		from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
26) MITCH BAER	50.00									
ASSOCIATE VP, POLICY ANALYSIS	0.					X		225,392.	0.	9,182
27) KATHERINE SIGLER	50.00							100 150		10 605
ASSOCIATE VP, OPERATIONS & HR	0.					X		123,173.	0.	12,635
28) VICTORIA SULLIVAN ASSOCIATE VP , FEDERAL AFFAIRS	50.00					X		271,195.	0.	49,275
29) ROBERT DUNCAN	50.00									
FORMER CEO & PRESIDENT	0.						Х	450,000.	0.	0
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A						<b>&gt; &gt;</b>			
2 Total number of individuals (including but not							o re	ceived more than	\$100,000 of	
reportable compensation from the organization		(		u u.		o, <b></b>		oolvod moro man	Ψ100,000 01	
· · · · · · · · · · · · · · · · · · ·										Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched.										3 X
4 For any individual listed on line 1a, is the organization and related organizations graindividual	sum of repeater than	ortab \$15	ole c 50,0	com 00?	per	nsatio	n aı	nd other compens	sation from the	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Yo	accrue co	mpen	sati	on f	fron	n any	un	related organization		5 X
Section B. Independent Contractors	os, comple	1 <del>0</del> 301	ı <del>c</del> ut	iie J	101	SUUII	per	3 <i>011</i>		<u> </u>
Complete this table for your five highest compensation from the organization. Report of year.										

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VIII	Statement of Re	venue
Fait viii	i Statement of Ne	zvenue

		Check if Schedule O contains a respon	nse or note to an	y line in this Part VI	11		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c  Related organizations 1d  Government grants (contributions) . 1e  All other contributions, gifts, grants, and similar amounts not included above . 1f					
Cor	g	Noncash contributions included in lines 1a-1f: \$					
	<u>h</u>	Total. Add lines 1a-1f		0.			
nua			Business Code	5 010 617	5 010 615		
Program Service Revenue	2a b c d	MEMBER DUES	900099	5,012,617.	5,012,617.		
gra	e	All					
ě	f g	All other program service revenue		5,012,617.			
	3	Investment income (including divider and other similar amounts)	nds, interest,  proceeds	10,804.	10,804.		
	5	Royalties	(ii) Personal	0.			
	6a b c	Gross rents		0.			
	7a b	Gross amount from sales of assets other than inventory  Less: cost or other basis  (i) Securities	(ii) Other				
	_	and sales expenses					
	C C	Gain or (loss)	<u> </u>	0.			
Revenue	d 8a	Net gain or (loss)  Gross income from fundraising events (not including \$ of contributions reported on line 1c).		0.			
Other		See Part IV, line 18 a					
ᅙ		Less: direct expenses b					
	9a	Net income or (loss) from fundraising events  Gross income from gaming activities.  See Part IV, line 19		0.			
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming activities	. <u></u>	0.			
	10a	Gross sales of inventory, less returns and allowances a					
	b c	Less: cost of goods sold <b>b</b> Net income or (loss) from sales of inventory		0.			
	ب	Miscellaneous Revenue	Business Code	U.			
	115	OTHER INCOME	900099	12,010.	12,010.		
	11a						
	b						
	c d	All other revenue					
	e	Total. Add lines 11a-11d	<b></b>	12,010.			
	12	Total revenue. See instructions.		5,035,431.	5,035,431.		

AMERICAN COALITION FOR CLEAN COAL ELECTRICITY

JSA 7E1051 1.000

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## Part IX Statement of Functional Expenses

0 1	 columns. All other organizations m	

	Check if Schedule O contains a resp	onse or note to any line	in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	0.			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	1,324,065.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	447,875.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	38,972.			
9	Other employee benefits	23,110.			
10	Payroll taxes	58,818.			
11	Fees for services (non-employees):				
а	Management	0.			
	Legal	129,651.			
С	Accounting	129,198.			
d	Lobbying	0.			
	Professional fundraising services. See Part IV, line 17.	0.			
f	Investment management fees	0.			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	21,901.			
12	Advertising and promotion	0.			
13	Office expenses	111,976.			
14	Information technology	135,151.			
15	Royalties	0.			
16	Occupancy	103,572.			
17	Travel	102,553.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	0.			
20	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	3,548.			
23	Insurance	29,242.			
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
<u> </u>	STATE AND FEDERAL AFFAIRS	2,109,103.			
-	COMMUNICATIONS PROGRAMS	309,248.			
•	MISCELLANEOUS	64,405.			
d	LEASE TERMINATION FEES	8,792.			
е	All other expenses	8,792.			
	Total functional expenses. Add lines 1 through 24e	5,159,972.			
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)	0.			

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#### Part X Balance Sheet

		Check if Schedule O contains a response of	r not	e to any line in this Pa	art X		
		·			(A) Beginning of year		(B) End of year
	1	Cash - non-interset-hearing			0.	1	0.
	2	Cash - non-interest-bearing Savings and temporary cash investments			6,686,191.	2	5,615,978.
	3				1,913.	3	341.
		Pledges and grants receivable, net			0.	4	0.
	4	Accounts receivable, net  Loans and other receivables from current and	forma	r officers directors	<u> </u>	4	0.
	5						
		trustees, key employees, and highest co			0.	_	0.
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified pers	ons (as	s defined under section	<u> </u>	5	0.
		4958(f)(1)), persons described in section 4958(c)(3)(B)	, and	contributing employers			
		and sponsoring organizations of section 501(c)(9) volu			0.	_	0.
ţ	_	organizations (see instructions). Complete Part II of Sche			0.	6	0.
Assets	7	Notes and loans receivable, net			0.	7	0.
Ÿ	8	Inventories for sale or use			96,214.	8 9	41,635.
	9	Prepaid expenses and deferred charges	i		70,214.	9	41,033.
	iva	Land, buildings, and equipment: cost or	10a	28,557.			
	<b>L</b>				5,316.	40-	1,768.
		Less: accumulated depreciation		•	0.		0.
	11	Investments - publicly traded securities			0.		0.
	12	Investments - other securities. See Part IV, line 11			0.	12	0.
	13 14	Investments - program-related. See Part IV, line 11			0.	13 14	0.
	15	Intangible assets			52,479.	15	0.
	16	Other assets. See Part IV, line 11			6,842,113.	16	5,659,722.
_		Total assets. Add lines 1 through 15 (must equal			953,482.	17	467,557.
	17 18	Accounts payable and accrued expenses			0.	18	0.
	19	Grants payable			629,300.	19	12,500.
	20	Deferred revenue			0.	20	0.
	21	Tax-exempt bond liabilities  Escrow or custodial account liability. Complete Pa	art IV/	of Schedule D	0.	21	0.
w	22	Loans and other payables to current and for			<u> </u>	41	J.
Liabilities		trustees, key employees, highest compen					
ē		disqualified persons. Complete Part II of Schedule			0.	22	0.
Ë	23	Secured mortgages and notes payable to unrelate			0.	23	0.
	24	Unsecured notes and loans payable to unrelated			0.	24	0.
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lines					
		of Schedule D		· .	64,912.	25	109,787.
	26	Total liabilities. Add lines 17 through 25			1,647,694.	26	589,844.
		Organizations that follow SFAS 117 (ASC 958),	chec				
Ces		complete lines 27 through 29, and lines 33 and			E 104 410		F 060 0F0
ılan	27	Unrestricted net assets			5,194,419.	27	5,069,878.
B	28	Temporarily restricted net assets			0.	28	0.
P T	29	Permanently restricted net assets			0.	29	0.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.	, chec	k here ► and			
ts (	30	Capital stock or trust principal, or current funds				30	
SSe	31	Paid-in or capital surplus, or land, building, or equ	iipmer	nt fund		31	
Ä	32	Retained earnings, endowment, accumulated inco	ome,	or other funds		32	
Ne	33	Total net assets or fund balances			5,194,419.	33	5,069,878.
	34	Total liabilities and net assets/fund balances		<u> </u>	6,842,113.	34	5,659,722.
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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,0	35,4	31.
2	Total expenses (must equal Part IX, column (A), line 25)	2			59,9	
3	Revenue less expenses. Subtract line 2 from line 1	3		-1	24,5	41.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5,1	94,4	19.
5	Net unrealized gains (losses) on investments	5				0.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		5,0	69,8	78.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					X
	·				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were cor					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?			2b	Х	
~	If "Yes," check a box below to indicate whether the financial statements for the year were aud					
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversio	tht			
Ū	of the audit, review, or compilation of its financial statements and selection of an independent action	_	- 1	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, or					
	Schedule O.	λημαίτι	"'			
3 ~	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	in			
эa	the Single Audit Act and OMB Circular A-133?	i iUitli	""	3a		Х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	laraa t	he	-		
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	•	116	3h		

#### SCHEDULE C (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2017

Open to Public

Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. 
► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Tax)	(see separate instructions), then	1	, , ,	,	
	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Nam	e of organization			Employer ide	ntification number
AME		CLEAN COAL ELECTRICITY		52-1799	
Par		organization is exempt under			
1		organization's direct and indirect p	olitical campaign ac	ctivities in Part IV. (see in	structions for
	definition of "political campa	•			
2		xpenditures (see instructions)			
3	Volunteer hours for political	campaign activities (see instruction	ns)		
Par		organization is exempt under s			
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5 ▶\$	
2		cise tax incurred by organization m			
3	•	a section 4955 tax, did it file Form	•		
					Yes No
	If "Yes," describe in Part IV.				
Par		organization is exempt under			).
1		expended by the filing organization			
2		ng organization's funds contributed			
		es			
3		enditures. Add lines 1 and 2. En			
	Did the filing appropriation file	4400 DOI for this year?		▶\$	
4 5	Enter the names addresses	e Form 1120-POL for this year? and employer identification numb	er (FIN) of all section	on 527 political organize	Yes No
J		s. For each organization listed, en			
		ributions received that were prom			
	as a separate segregated fur	nd or a political action committee (I	PAC). If additional sp	ace is needed, provide i	nformation in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization. If
					none, enter -0
(1)					
(')					
(2)					
(-,					
(3)					
. ,					
(4)					
_					
 (5)					<u> </u>
(6)					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

301	ledule C (FUIII 330 01 330-EZ) 2017	7 11 11 L L C 2 11 A	СОППТТ	TON TON CHIL	m, com nnnc	11(1(11) )2 1		raye 🚣
Р	art II-A Complete if the org	janization	is exem <sub>l</sub>	ot under section	n 501(c)(3) and	filed Form 5768 (ele	ection under	
A	Check ▶ if the filing organiz address, EIN, exp		•	• , ,		ach affiliated group men	nber's name,	
В	Check ▶ if the filing organiz	zation check	ed box A	and "limited conti	ol" provisions app	oly.		
		on Lobbyin				(a) Filing	(b) Affilia	ted
	(The term "expendit				-	organization's totals	group tot	als
	a Total lobbying expenditures to i							
	<b>b</b> Total lobbying expenditures to i		-					
	c Total lobbying expenditures (ad				-			
	d Other exempt purpose expendit							
	e Total exempt purpose expendito	•		,	-			
1	f Lobbying nontaxable amount.	Enter the a	amount fro	om the following	table in both			
	columns.	) ar (h) iar Th		nantavahla amaun				
	If the amount on line 1e, column (a				is:			
	Over \$500,000 but not over \$1,000			nount on line 1e. s 15% of the excess	0.00r \$500 000			
	Over \$1,000,000 but not over \$1,5			s 10% of the excess				
	Over \$1,500,000 but not over \$17,			s 5% of the excess				
	Over \$17,000,000		,000,000.	2 0 70 01 1110 070000	<u>στο. φτησσσησσσ.</u>			
_	g Grassroots nontaxable amount							
	h Subtract line 1g from line 1a. If							
i	Subtract line 1f from line 1c. If a							
j	j If there is an amount other th					tion file Form 4720		
	reporting section 4911 tax for the	his year?					Yes	No
					er section 501(h)			
	(Some organizations tha				-		nns below.	
		See the	e separate	instructions for	lines 2a through	2f.)		
_		Lohbyir	ng Expend	litures During 4-V	ear Averaging Pe	riod		
_								
	Calendar year (or fiscal year beginning in)	(a) 20	14	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) Tot	al
2	a Lobbying nontaxable amount							
	<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))							
_	C Total lobbying expenditures							
_	d Grassroots nontaxable amount							
_	Grassroots ceiling amount (150% of line 2d, column (e))							
f	F Grassroots lobbying expenditures							

	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d For	m 5768		Page 3
	2.2	(a	1)		(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed					
des	cription of the lobbying activity.	Yes	No	A	mount	
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
9 h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ection		
1 2 3	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures fro			∟	Yes 1 2 3 X	X X
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."				ine 3, is	
1	Dues, assessments and similar amounts from members			1	5,012	,617
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).					
а	Current year			2a		,515
b	Carryover from last year			2b	-615	
С	Total			2c	-347	,317 ,262
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due of the section 162(e) due o			3	501	, 202
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo					
	and political expenditure next year?			4		
5	Taxable amount of lobbying and political expenditures (see instructions)			5	-848	,579
Prov	Supplemental Information ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate se instructions); and Part II-B, line 1. Also, complete this part for any additional information.	d grou	up list	); Part II-	A, lines 1	l and

Part IV

Schedule C (Form 990 or 990-EZ) 2017 Page 4

Supplemental Information (continued)

#### **SCHEDULE D** (Form 990)

# Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.  Complete if the organization answered "Yes" on Form 990, Part IV, line 6.  (a) Donor advised funds  (b) Funds and of the Aggregate value of contributions to (during year)  Aggregate value at end of year	Yes No
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.  (a) Donor advised funds (b) Funds and of the contribution of the part of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	Yes No
(a) Donor advised funds (b) Funds and of Total number at end of year	Yes No
1 Total number at end of year	Yes No
Aggregate value of contributions to (during year)  Aggregate value of grants from (during year)  Aggregate value at end of year	Yes No
Aggregate value of grants from (during year)  Aggregate value at end of year.  Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part II  Conservation Easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	Yes No
Aggregate value at end of year	Yes No
<ul> <li>Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?</li> <li>Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?</li> <li>Part II</li> <li>Conservation Easements.</li> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 7.</li> </ul>	Yes No
funds are the organization's property, subject to the organization's exclusive legal control?  6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Conservation Easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	Yes No
Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	Yes No
only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	
Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
Part II Conservation Easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	ortant land area
	ortant land area
	ortant land area
1 Purpose(s) of conservation easements held by the organization (check all that apply).	ortant land area
Preservation of land for public use (e.g., recreation or education)  Preservation of a historically important processing and the processing are preservation of a historically important processing and the processing are preservation of a historically important processing are preservation.	
Protection of natural habitat  Preservation of a certified historic	c structure
Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conse	ervation End of the Tax Year
substitution and task substitution from	ind of the rax rear
a Total number of conservation easements	
b Total acreage restricted by conservation easements	
c Number of conservation easements on a certified historic structure included in (a) 2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
historic structure listed in the National Register	zation during the
tax year	zation during the
4 Number of states where property subject to conservation easement is located ▶	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
violations, and enforcement of the conservation easements it holds?	Yes No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements d	
b	adming the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easemer	ents during the year
►\$	<b>3</b> · · <b>7</b> · · ·
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	
and section 170(h)(4)(B)(ii)?	Yes No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement,	, and
balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that de	escribes the
organization's accounting for conservation easements.	
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a works of art, historical treasures, or other similar assets held for public exhibition, education, or research	and balance sheet
public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.	in furtherance of
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement a	and balance sheet
works of art, historical treasures, or other similar assets held for public exhibition, education, or research	
public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1	
(ii) Assets included in Form 990, Part X	
2 If the organization received or held works of art, historical treasures, or other similar assets for financial	gain, provide the
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	

Schedule D (Form 990) 2017 Page **2** 

	t III Organizations Maintainir	a Collections of	Art Hiet	orical T	roacuro	s or Ot	her Similar Asse	te (conti	Page Z
3	Organizations Maintainir Using the organization's acquisitio								
3	collection items (check all that appl		other record	us, check	ally of	the follow	virig triat are a sigi	illicant us	e or its
_	` ` ''	у).		]					
a	Public exhibition		d	7		nge progra			
b	Scholarly research		e	Other					
С	Preservation for future gener								
4	Provide a description of the organ	lization's collections	s and expla	iin how t	hey furth	ner the or	ganization's exemp	t purpose	in Part
	XIII.								
5	During the year, did the organization						_		
	assets to be sold to raise funds rath		ained as pa	rt of the c	organizat	ion's colle	ction?	Yes	No
Par	Complete if the organizat 990, Part X, line 21.		s" on Form	n 990, Pa	art IV, Iir	ne 9, or re	eported an amoun	t on Form	1
1 а	Is the organization an agent, truste							<b></b> ,	<b>—</b>
	included on Form 990, Part X?	5						Yes	No
b	If "Yes," explain the arrangement in	n Part XIII and comp	plete the foll	lowing tab	ole:				
							Amount		
С	Beginning balance					1c			
d	Additions during the year					1 d			
е	Distributions during the year				🗠	1 e			
f	Ending balance					1f			
	Did the organization include an am						-	Yes	No
b	If "Yes," explain the arrangement in	n Part XIII. Check h	ere if the ex	planation	has bee	n provided	on Part XIII		
Par									
	Complete if the organizati	on answered "Yes	s" on Form	990, Pa	art IV, Iir	e 10.			
		(a) Current year	(b) Prior	r year	<b>(c)</b> Two	years back	(d) Three years back	(e) Four ye	ears back
1a	Beginning of year balance								
b	Contributions								
C	Net investment earnings, gains,								
·	and losses								
ч	Grants or scholarships								
	Other expenditures for facilities								
-	-								
	and programs								
f	Administrative expenses								
g	End of year balance	•		(1) 4					
2 a	Provide the estimated percentage Board designated or quasi-endowm		end balance %	e (line 1g,	column (	a)) neid as	<b>:</b> :		
b	Permanent endowment	%	_′0						
b	Temporarily restricted endowment								
C	The percentages on lines 2a, 2b, a		1000/						
2-		•		tion that	مدم مماط	المعامما مما	sistanad for the		
sa	Are there endowment funds not in	ine possession or ti	ne organiza	lion mai a	are neid	and admi	iistered for the	Υe	es No
	organization by:								3 110
	(i) unrelated organizations							3a(i)	_
	(ii) related organizations							3a(ii)	_
_	If "Yes" on line 3a(ii), are the relate	•	•					3b	
4	Describe in Part XIII the intended u		ition's endov	wment fun	ids.				
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.									
	Description of property	(a) Cost or	other basis	(b) Cost o		s (c) Ac	cumulated (e	d) Book value	
4 -	Land		tment)	(ot	ther)	dep	reciation		
_	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment				28,557	7.	26,789.	1	768.
e	Other								
Tota	il. Add lines 1a through 1e. (Column	(d) must equal Forr	m 990, Part .	X, column	n (B), line	10c.)	▶	1	768.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 Page 3

Generalie B (Form 330) 2017		r age <b>a</b>
Part VII Investments - Other Securities.	"Vos" on Form 000	Part IV line 11h See Form 990 Part V line 12
·		Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		·
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII Investments - Program Related. Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation:
		Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		
	"Yes" on Form 990.	Part IV, line 11d. See Form 990, Part X, line 15.
	scription	(b) Book value
(1)	<u>'</u>	
(2)		
(3)		
(4)		
(5)		
_(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)	<u></u> ▶
Part X Other Liabilities. Complete if the organization answered line 25.	"Yes" on Form 990,	Part IV, line 11e or 11f. See Form 990, Part X,
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes	(b) Dook raide	
(2) ACCRUED EMPLOYEE BENEFITS	109,7	87.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>▶</b> 109,7	87.

JSA 7E1270 1.000

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017 Page **4** 

Schedu	le D (Form 990) 2017		Page 4
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	5,035,431.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	5,035,431.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,035,431.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	5,159,972.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	5,159,972.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,159,972.
	XIII Supplemental Information.		
2; Par	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Patt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	PAGE 5		

JSA

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Schedule D (Form 990) 2017

#### Part XIII Supplemental Information (continued)

SCH D PART X, LINE 2:

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT OF AN ORGANIZATION TO EVALUATE INCOME TAX POSITIONS TAKEN BY THE ORGANIZATION AND RECOGNIZE AN INCOME TAX LIABILITY IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE. MANAGEMENT HAS EVALUATED THE INCOME POSITIONS TAKEN BY ACCCE AND CONCLUDED THAT AS OF DECEMBER 31, 2017, THERE WERE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

#### **SCHEDULE J** (Form 990)

**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN COALITION FOR CLEAN COAL ELECTRICITY

Part I Questions Regarding Compensation

Employer identification number 52-1799853

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions  Payments for business use of personal residence  Lighthor against all the drag or initiation force			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees  Paragral considers (such as maid abouttour about			
	Discretionary spending account  Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	1b		
2	explain	10		
2	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
		2		
_	1a?			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	X   Independent compensation consultant   X   Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
-	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
-	Regulations section 53.4958-6(c)?	9		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
ROBERT DUNCAN	(i)	0.	450,000.	0.	0.	0.	450,000.	0.
1 FORMER CEO & PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
MITCH BAER	(i)	169,292.	56,100.	0.	7,650.	1,532.	234,574.	0.
<b>2</b> ASSOCIATE VP, POLICY ANALYSIS	(ii)	0.	0.	0.	0.	0.	0.	0.
PAUL BAILEY	(i)	505,988.	346,872.	0.	24,300.	24,430.	901,590.	0.
3 CEO & PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
MICHELLE BLOODWORTH	(i)	275,000.	135,000.	0.	9,900.	2,575.	422,475.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
VICTORIA SULLIVAN	(i)	193,007.	78,188.	0.	17,371.	31,904.	320,470.	0.
5 <sup>ASSOCIATE VP , FEDERAL AFFAIRS</sup>	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
6	(ii)							
	(i)							
_ 7	(ii)							
	(i)							
_ 8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
_11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2017

#### Part | Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2017

JSA 7E1505 1.000

#### **SCHEDULE O** (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

52-1799853

AMERICAN COALITION FOR CLEAN COAL ELECTRICITY

FORM 990, PART VI, SECTION A, LINE 1:

THE BOARD OF DIRECTORS ANNUALLY APPOINTS A COMMITTEE OF THE BOARD CALLED THE LEADERSHIP COUNCIL. TO THE EXTENT PERMITTED BY THE D.C NONPROFIT CORPORATION ACT, THE ARTICLES OF INCORPORATION, AND BYLAWS, THE LEADERSHIP COUNCIL HAS AND EXERCISES THE AUTHORITY OF THE BOARD OF DIRECTORS BY MAKING RAPID GOVERNANCE OR POLICY DECISIONS WHEN IT IS NOT POSSIBLE TO HAVE A BROADER DISCUSSION WITH THE FULL BOARD OF DIRECTORS; AND TAKES SUCH OTHER ACTIONS AS MAY BE AUTHORIZED BY THE BOARD OF DIRECTORS.

THE LEADERSHIP COUNCIL IS COMPRISED OF BOARD MEMBERS SERVING BY VIRTUE OF OFFICE, TO INCLUDE THE BOARD CHAIRMAN, THE VICE CHAIRMAN, THE IMMEDIATE-PAST BOARD CHAIRMAN, THE CO-CHAIRS OF THE POLICY COMMITTEE, AND THE CO-CHAIRS OF THE COMMUNICATIONS COMMITTEE. ADDITIONAL AT-LARGE SEATS ARE FILLED AS NECESSARY TO FULFILL THE CORPORATION'S INDUSTRY REPRESENTATION GUIDELINES.

FORM 990 PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS FIVE CLASSES OF MEMBERSHIP. FIRST TIER MEMBERS HAVE A REPRESENTATIVE ON THE BOARD OF DIRECTORS; ARE ELIGIBLE TO SERVE AS CHAIRMAN OR VICE CHAIRMAN OF THE BOARD; ARE ELIGIBLE TO SERVE ON THE LEADERSHIP COUNCIL; AND ARE ELIGIBLE TO SERVE ON, AND TO CHAIR OR CO-CHAIR, ANY COMMITTEES OF THE BOARD OR STANDING COMMITTEES.

COMMITTEE CHARTER.

SECOND TIER MEMBERS HAVE A REPRESENTATIVE ON THE BOARD OF DIRECTORS; ARE ELIGIBLE TO SERVE AS CHAIRMAN OR VICE CHAIRMAN OF THE BOARD AS NECESSARY TO FULFILL THE CORPORATION'S INDUSTRY REPRESENTATION GUIDELINES; ARE ELIGIBLE TO SERVE ON COMMITTEES OF THE BOARD, INCLUDING THE LEADERSHIP COUNCIL, AS NECESSARY TO FULFILL THE CORPORATION'S INDUSTRY REPRESENTATION GUIDELINES; AND ARE ELIGIBLE TO SERVE ON, AND TO CHAIR OR CO-CHAIR, ANY ACCCE STANDING COMMITTEES, CONSISTENT WITH THE RELEVANT

THIRD TIER MEMBERS HAVE A REPRESENTATIVE ON THE BOARD OF DIRECTORS AND ARE ELIGIBLE TO SERVE ON STANDING COMMITTEES, CONSISTENT WITH THE RELEVANT COMMITTEE CHARTER.

CONTRIBUTING MEMBERS ARE NOT ELIGIBLE TO SERVE ON THE BOARD OF DIRECTORS, ANY COMMITTEE OF THE BOARD, OR ANY STANDING COMMITTEE.

ASSOCIATE MEMBERS ARE NOT ELIGIBLE TO SERVE ON THE BOARD OF DIRECTORS, ANY COMMITTEE OF THE BOARD, OR ANY STANDING COMMITTEE.

THE BOARD OF DIRECTORS RECEIVES AND APPROVES ALL APPLICATIONS FOR MEMBERSHIP. IN ADDITION, THE BOARD HAS THE RIGHT TO SUSPEND OR EXPEL MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

NEW BOARD MEMBERS AND CONTRIBUTING BOARD MEMBERS ARE APPROVED BY THE

BOARD OF DIRECTORS. EACH MEMBER COMPANY THAT IS ELIGIBLE TO ELECT A

DIRECTOR SELECTS ITS INDIVIDUAL REPRESENTATIVE TO SERVE ON THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED AND APPROVED BY MANAGEMENT OF ACCCE AND BY ACCCE
LEGAL COUNSEL BEFORE FILING. THE FORM 990 IS SUBMITTED TO THE ENTIRE
BOARD BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

ACCCE DISTRIBUTES ITS CONFLICT OF INTEREST POLICY TO THE BOARD OF

DIRECTORS ANNUALLY. AS PART OF THE POLICY, BOARD MEMBERS ARE REQUIRED TO

DISCLOSE REAL OR POTENTIAL CONFLICTS. IF ACCCE STAFF ARE MADE AWARE OF

ANY SUCH CONFLICTS, THEY PREPARE A PLAN OF ACTION FOR THE BOARD'S

CONSIDERATION (E.G. RECUSAL FROM PARTICIPATING IN ANY DELIBERATIONS OR

DECISIONS RELEVANT TO THE DISCLOSURE). STAFF ARE SIMILARLY APPRISED OF

ACCCE'S POLICY AND THE PRESIDENT IS RESPONSIBLE FOR DETERMINING

APPROPRIATE RESOLUTION, WITH INPUT FROM THE BOARD CHAIR AND VICE CHAIR AS

APPROPRIATE UNDER ACCCE'S BYLAWS.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION FOR PRESIDENT AND CEO:

IN REVIEWING AND APPROVING THE AMOUNT OF COMPENSATION FOR THE ACCCE

PRESIDENT AND CEO, THE ACCCE COMPENSATION COMMITTEE ANNUALLY FOLLOWS THE

PROCEDURES REQUIRED BY THE ACCCE COMPENSATION POLICY. AS DISCUSSED BELOW,

THE ACCCE COMPENSATION POLICY REQUIRES THE COMPENSATION COMMITTEE TO: (1)

APPROVE THE AMOUNT OF COMPENSATION PRIOR TO PAYMENT; (2) USE APPROPRIATE

COMPARABILITY DATA WHEN MAKING ITS DETERMINATION; AND (3) CONCURRENTLY DOCUMENT ITS DECISIONS IN WRITING.

- 1) APPROVAL PRIOR TO COMPENSATION PAYMENT. ANY CHANGES IN COMPENSATION OR AWARD OF BONUS COMPENSATION DETERMINED UNDER THE AUSPICES OF THE COMPENSATION COMMITTEE MUST BE APPROVED BY THE COMPENSATION COMMITTEE IN ADVANCE OF ANY SUCH PAYMENT BEING MADE.
- 2) COMPARABILITY DATA. WHEN THE COMPENSATION COMMITTEE IS CONSIDERING
  COMPENSATION TO ACCCE'S PRESIDENT AND CEO, IT MUST RELY ON COMPARABILITY
  DATA THAT DEMONSTRATES THE FAIR MARKET VALUE OF THE COMPENSATION IN
  QUESTION. FOR EXAMPLE, WHEN DEVELOPING OR EVALUATING COMPENSATION
  PACKAGES, THE COMPENSATION COMMITTEE MUST SECURE OR REVIEW DATA THAT
  DOCUMENTS COMPENSATION LEVELS FOR SIMILARLY QUALIFIED INDIVIDUALS IN LIKE
  POSITIONS AT LIKE ORGANIZATIONS. THIS DATA MAY INCLUDE THE FOLLOWING:
- A. EXPERT COMPENSATION STUDIES BY INDEPENDENT FIRMS;
- B. WRITTEN JOB OFFERS FOR POSITIONS AT SIMILAR ORGANIZATIONS;
- C. DOCUMENTED INFORMATION ABOUT SIMILAR POSITIONS AT BOTH NONPROFIT AND FOR-PROFIT ORGANIZATIONS; AND
- D. INFORMATION OBTAINED FROM THE IRS FORM 990 FILINGS OF SIMILAR ORGANIZATIONS.
- 3) CONCURRENT DOCUMENTATION. THE COMPENSATION COMMITTEE MUST DOCUMENT, WITHIN 30 DAYS OF THE COMPENSATION COMMITTEE'S DETERMINATION, HOW IT REACHED ITS DECISIONS, INCLUDING THE DATA ON WHICH IT RELIED. WRITTEN OR

ELECTRONIC RECORDS OF THE COMPENSATION COMMITTEE (SUCH AS MEETING MINUTES) MUST NOTE:

- A. THE TERMS OF THE COMPENSATION AND THE DATE SUCH COMPENSATION DECISIONS WERE MADE;
- B. THE MEMBERS OF THE COMPENSATION COMMITTEE WHO WERE PRESENT DURING THE DEBATE ON THE COMPENSATION THAT WAS ULTIMATELY APPROVED AND THOSE WHO VOTED IN THIS REGARD;
- C. THE COMPARABILITY DATA OBTAINED AND RELIED UPON, AND HOW THE DATA WERE OBTAINED; AND
- D. ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION OF THE COMPENSATION BY ANYONE WHO HAD A CONFLICT OF INTEREST WITH RESPECT TO THE DECISION ON THE COMPENSATION.

THE COMPENSATION PROCESS DESCRIBED WAS UNDERTAKEN IN DECEMBER 2016 TO SET COMPENSATION FOR 2017.

FORM 990, PART VI, SECTION C, LINE 19:

AVAILABLE TO THE GENERAL PUBLIC.

REVENUE CODE SECTION 6104 BY MAKING ITS FORM 1024, APPLICATION FOR

RECOGNITION OF EXEMPTION UNDER SECTION 501(A), DETERMINATION LETTER FROM

THE IRS, AND THE FORMS 990 FOR ITS THREE MOST RECENTLY COMPLETED TAX

PERIODS AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST. HOWEVER, AS SECTION
6104 DOES NOT REQUIRE ORGANIZATIONS EXEMPT UNDER SECTION 501(C)(6) TO

DISCLOSE THEIR GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES, OR

FINANCIAL STATEMENTS, ACCCE HAS DECIDED NOT TO MAKE SUCH INFORMATION

ACCCE COMPLIES WITH THE PUBLIC INSPECTION REQUIREMENTS OF INTERNAL

FORM 990, PART XII, LINE 2C:

ACCCE FINANCIAL COMMITTE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT, REVIEW AND COMPILATION OF ITS FINANCIAL STATEMENTS, AND THE SELECTION OF INDEPENDENT ACCOUNTANTS.

ATTACHMENT 1

#### FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE AMERICAN COALITION FOR CLEAN COAL ELECTRICITY (ACCCE) IS THE ONLY NATIONAL TRADE ORGANIZATION WHOSE SOLE MISSION IS TO ADVOCATE AT THE FEDERAL AND STATE LEVELS ON BEHALF OF COAL-FUELED ELECTRICITY AND THE COAL FLEET. TO CARRY OUT OUR MISSION, WE ENGAGE CONSTRUCTIVELY WITH ELECTED AND APPOINTED OFFICIALS, POLICYMAKERS, REGULATORS, STAKEHOLDERS, AND THE PUBLIC. OUR MEMBERSHIP IS COMPRISED OF MAJOR INDUSTRIES - ELECTRICITY GENERATORS, COAL PRODUCERS, RAILROADS, BARGE OPERATORS, AND EQUIPMENT MANUFACTURERS - INVOLVED IN GENERATING ELECTRICITY FROM COAL.

ATTACHMENT 2

#### FORM 990, PART III - PROGRAM SERVICE, LINE 4B

STATE ADVOCACY: REGIONAL, STATE, AND LOCAL GOVERNMENT OFFICIALS

AND ORGANIZATIONS ENGAGE IN PUBLIC POLICY ACTIVITIES THAT AFFECT

THE COAL FLEET. ACCCE STAYS ABREAST OF THESE ACTIVITIES IN MANY

STATES, ESPECIALLY STATES WITH SIGNIFICANT COAL PRODUCTION, STATES

THAT RELY ON COAL FOR MUCH OF THEIR ELECTRICITY, AND STATES WHERE

THERE IS OPPOSITION TO THE COAL FLEET. ACCCE REPRESENTS THE COAL

FLEET BEFORE INFLUENTIAL PUBLIC POLICY GROUPS, ESPECIALLY

ORGANIZATIONS THAT REPRESENT ELECTED AND APPOINTED STATE

OFFICIALS. WHILE ACCCE TYPICALLY ENGAGES POLICYMAKERS ON A VARIETY

Name of the organization

AMERICAN COALITION FOR CLEAN COAL ELECTRICITY

Employer identification number 52-1799853

ATTACHMENT 2 (CONT'D)

OF ISSUES, THE MAIN EMPHASIS OF STATE-RELATED ACTIVITIES IN 2017 FOCUSED ON OUTREACH TO EDUCATE STATE OFFICIALS REGARDING THE IMPORTANCE OF MAINTAINING COAL FUELED ELECTRICITY FOR RESILIENCE AND GRID SECURITY.

ATTACHMENT 3

FORM 990, PART III - PROGRAM SERVICE, LINE 4C

COMMUNICATIONS: ACCCE SEEKS TO EDUCATE THE PUBLIC AND MEDIA THROUGH VARIOUS PLATFORMS, INCLUDING EARNED AND DIGITAL MEDIA REGARDING THE IMPORTANCE OF THE COAL FLEET AND THE IMPORTANT ROLE
IT PLAYS IN ENSURING A RESILIENT AND RELIABLE ELECTRIC GRID.

ACCCE'S COMMUNICATIONS EFFORTS INCLUDED BOTH REGIONAL AND NATIONAL EFFORTS. A BROAD RANGE OF TACTICS WERE EMPLOYED:

- DIGITAL CONTENT: ACCCE PROMOTED DIGITAL CONTENT ENCOURAGING

  POLICYMAKERS TO LEARN MORE ABOUT THE ROLE COAL-BASED ELECTRICITY

  PLAYS IN THEIR LIVES AND URGING THEM TO SUPPORT

  POLICIES THAT SUPPORT COAL-BASED ELECTRICITY. THE CONTENT WAS

  PROMOTED ON SOCIAL PLATFORMS INCLUDING YOUTUBE, GOOGLE, FACEBOOK

  AND TWITTER.
- POLLING: ACCCE CONDUCTED POLLING TO GAIN INSIGHTS INTO THE PUBLIC'S PERCEPTION OF THE ROLE OF COAL-BASED ELECTRICITY.
- EARNED MEDIA: ACCCE PARTICIPATED IN INTERVIEWS, AND ISSUED PRESS

Name of the organization

AMERICAN COALITION FOR CLEAN COAL ELECTRICITY

Employer identification number
52-1799853

ATTACHMENT 3 (CONT'D)

STATEMENTS HIGHLIGHTING THE IMPORTANT ROLE THAT THE NATION'S COAL FLEET PLAYS IN PROVIDING FOR RELIABLE, SECURE, RESILIENT AND AFFORDABLE ELECTRICITY.

ATTACHMENT 4

#### 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
DCI GROUP,LLC 1828 L. ST. NW #400 WASHINGTON, DC 20036	DIRECT CONTACT	490,770.
HUNTON & WILLIAMS LLP 2200 PENNSYLVANIA AVE. NW WASHINGTON, DC 20037	LEGAL SERVICES	261,736.
VAN NESS FELDMAN 1050 THOMAS JEFFERSON ST. NW WASHINGTON, DC 20007	LEGAL SERVICES	167,446.
HHQ VENTURES 511 UNION ST. NASHVILLE, TN 37219	RESEARCH	142,500.
VENABLE LLP 600 MASSACHUSETTS AVE. NW WASHINGTON, DC 20001	LEGAL SERVICES	134,494.